

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

07077000

FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SE	C USE ONLY
Prefix	Serial
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DA	TE RECEIVED
1	1

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Name of Offering (☐ check if this Private Placement of Limited Partnership		ne has changed, and indicate change.) FUND PLUS, L.P.		
Filing Under (Check box(es) that apply):			JULOE	
Type of Filing	⊠ Amendment			
		BASIC IDENTIFICATION DATA		
1. Enter the information requested about				
Name of Issuer ( check if this PETRUS FUND PLUS, L.P.	is an amendment and nan	ne has changed, and indicate change.)		
Address of Executive Offices	(No. and Street, City,	State, Zip Code)	Telephone Number (Includ	•
2300 West Plano Parkway, Plano,			(972) 535-19	900
Address of Principal Business Operations (if different from Executive Offices)	(No. and Street, City,	State, Zip Code) Telephone N	umber (Including Area Code)	
Brief Description of Business Investment Partnership				
Type of Business Organization	····			
corporation	$\boxtimes$	limited partnership, already formed		other (please specify)
_ `		, , ,		other (please specify)
business trust	<u> </u>	limited partnership, to be formed	V	
Actual or Estimated Date of Incorporat	ion or Organization:	Month 0 6	Year  0 6 ⊠ Actual	☐ Estimated
Jurisdiction of Incorporation or Organiz	zation: (Enter two-letter U	J.S. Postal Service abbreviation for State:	DE	
	CN for Canada;	FN for other foreign jurisdiction)		
			<u> </u>	
GENERAL INSTRUCTIONS				
Federal: Who Must File: All issuers making an offering of secur	ities in reliance on an exemption :	under Regulation D or Section 4(6), 17 CFR 230.501 et s	en or 1511 S.C. 77d(6)	
When To File: A notice must be filed no later than 15	days after the first sale of securi	ties in the offering. A notice is deemed filed with the Utte on which it is due, on the date it was mailed by United	J.S. Securities and Exchange Commission (S	EC) on the earlier of the date it it
Where To File: U.S. Securiues and Exchange Commis-				
		h must be manually signed. Any copies not manually signed.	gned must be photocopies of the manually si	gned copy or bear typed or printe
Information Required: A new filing must contain all changes from the information previously supplied in Pa	information requested. Amendmonths A and B. Part E and the Appe	ents need only report the name of the issuer and offering the indicated not be filed with the SEC.	ig, any changes thereto, the information req	uested in Part C, and any materia
Filing Fee: There is no federal filing fee.				
must file a separate notice with the Securities Adminis	trator in each state where sales an	ion (ULOE) for sales of securities in those states that he to be, or have been made. If a state requires the payme accordance with state law. The Appendix to the notice of ATTENTION	ent of a fee as a precondition to the claim for	the exemption, a fee in the prope
Failure to file notice in the a the appropriate federal no predicated on the filing of a	tice will not result	vill not result in a loss of the fed t in a loss of an available sta	eral exemption. Convers te exemption unless su	ely, failure to file ch exemption is

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THOMSUN FINANCIAL

			A. BASIC IDENTIF	ICATION DATA		
2.	Enter the information re	equested for the fo	llowing:			
X X	Each beneficial owner issuer;	having the power	has been organized within the to vote or dispose, or direct the	vote or disposition of, 10% of		
X X	Each executive officer Each general and mana		porate issuers and of corporate rtnership issuers.	general and managing partner	's of partnership is	suers; and
Che	ck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
	Name (Last name first, kcentral Capital Mana		naral Partner			
			Street, City, State, Zip Code)			
	0 West Plano Parkway					
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
	Name (Last name first,		tnes of Canasal Bastnes			
			tner of General Partner Street, City, State, Zip Code)		<del></del>	
	0 West Plano Parkway					
_	eck Box(es) that Apply:		☐ Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner
	Name (Last name first,					
			and President of General Pa	rtner of General Partner		
			Street, City, State, Zip Code)			
	O West Plano Parkway eck Box(es) that Apply:		☐ Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner
	Name (Last name first,					
			of General Partner of Genera	al Partner		
			Street, City, State, Zip Code)			
	O West Plano Parkway eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Ful	Name (Last name first,	if individual)				
Bus	iness or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
Che	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Ful	Name (Last name first,	if individual)				
Due	iness or Pasidense Adde	acc (Number and	Street, City, State, Zip Code)			
Dus	siliess of Residence Addi	ess (raumoer and	Succi, Chy, State, Zip Code)			
Che	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Ful	l Name (Last name first,	if individual)				
Bus	siness or Residence Addr	ess (Number and	Street, City, State, Zip Code)		<u> </u>	

						B. IN	FORM	1ATIO	N ABO	UT OF	FERI	NG	· ·	
1. H	Answer also in Appendix, Column 2, if filing under ULOE.										Yes □	No ⊠		
2. V											\$ <u>250</u>	000.00		
3. D	oes the o	ffering p	ermit jo	int own	ership of	a single	unit:						Yes	No 🖂
ir o re (: fo	indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Name (Last name first, if individual)														
Busine	ss or Res	idence /	Address	(Numbe	r and Sti	eet, City	y, State,	Zip Cod	le)					
Name	of Assoc	iated Bro	oker or E	Dealer										
	in Which													All States
[AL]	(All Sta	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		All States
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	(TX)	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Las	t name f	irst, if in	dividua	l)									
Busine	ess or Res	sidence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coc	le)		•			
Name	of Assoc	iated Br	oker or [	Dealer										· ·
	in Which													All States
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	,,,,	All States
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WAJ	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Las	t name i	irst, if in	ndividua	l)	· · · · · · · · · · · · · · · · · · ·					<del></del>			
Busine	ess or Res	sidence a	Address	(Numbe	r and St	rect, Cit	y, State,	Zip Coo	le)					
Name	of Assoc	iated Br	oker or I	Dealer				•		,				,
	in Which k "All Sta													All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<b>\$</b> 0	<b>s</b> 0
	Equity	<b>\$</b> 0	\$0
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	<b>\$</b> 0	\$0
	Partnership Interests	\$ 60,546,890.00	\$ 60,546,890,00
	Other (Specify)	\$ 0	\$ 0
	Total	\$ 60,546,890.00	\$ 60,546,890,00
	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	17	\$ 60,546,890.00
	Non-accredited Investors	0	<b>S</b> 0
	Total (for filings under Rule 504 only)	N/A	\$ N/A
	Answer also in Appendix, Column 4, if filing under ULOE	<del></del>	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of offering	Type of	Dollar Amount
	type of offering	Security	Sold
	Rule 505	N/A	\$ N/A
	Regulation A	N/A	\$ N/A
	Rule 504	N/A	\$ N/A
	Total	N/A	\$ N/A
	TVW		<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the secuthis offering. Exclude amounts relating solely to organization expenses of the issuer. The informable given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ation may	
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$ 0
	Legal Fees		\$ 25,000
	Accounting Fees		\$ 0
	Engineering Fees		<b>s</b> 0
	Sales Commissions (specify finder's fees separately)		<b>s</b> 0
	Other Expenses (identify)		\$ 0
	Total		\$ 25,000
	10(4)	<u>6</u>	<u>σ∠⊃,ŲŲŲ</u>

	b. Enter the difference between the aggregate offering price given in response to Part C-Question I and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	<u></u>		\$ 60,521,890,00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above.			
		O Dire	ments to fficers, ectors, & ffiliates	Payments To Others
	Salaries and fees	<b>S</b>	0	<b>s</b>
	Purchase of real estate	s		\$
	Purchase, rental or leasing and installation of machinery and equipment	\$		<b>s</b>
	Construction or leasing of plant buildings and facilities	<b>s</b>		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<b>\$</b>		\$
	Repayment of indebtedness	<b>s</b>		<b>s</b>
	Working capital	<b>s</b>		<b>s</b>
	Other (specify) (investments)	<b>s</b>	⊠	\$ <u>60,521,890.00</u>
	Column Totals	\$	⊠	\$ <u>60,521,890.00</u>
	Total Payments Listed (column totals added)		\$ <u>_60,</u> :	521,890.00
	D. FEDERAL SIGNATURE			
ign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is ature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, unation furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502.			
lss	uer (Print or Type) Signature Date			
Pet	rus Fund Plus, L.P. Septembe	1 12	2007	
Na	me of Signer (Print or Type)  Title of Signer (Print or Type)			
Da	vid Radunsky  Chief Operating Officer of Parkcentral Capital GP, LLC., g Management, L.P.	eneral p	oartner of P	arkcentral Capital
	ATTENTION			

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

					<u> </u>					
		E. STATE SIGNATURE								
1.		presently subject to any of the disqualification prov		Yes	No ⊠					
		ix, Column 5, for state response.		Ц						
2.	<ol> <li>The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.</li> </ol>									
3.	<ol> <li>The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.</li> </ol>									
4.		ssuer is familiar with the conditions that must be s which this notice is filed and understands that the at these conditions have been satisfied.								
	e issuer has read this notification and knows dersigned duly authorized person.	the contents to be true and has duly caused this no	tice to be signed on its l	behalf by the						
lss	uer (Print or Type)	Signature	Date	•						
Pet	rus Fund Plus, L.P.	Week >	September 12/2007	ı						
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)								
Da	vid Radunsky	Chief Operating Officer of Parkcentral Capital GP, LLC., general partner of Parkcentral Capital Management, L.P.								

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# **APPENDIX**

1		2	3	3 4						
	non-ac investor (Pa	to sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
AL										
AK								_		
AZ										
AR				<del> </del>						
CA		No	Limited Partnership Interests \$6,649,851.00	2	\$6,649,851.00	0	\$0	No		
со										
СТ										
DE							_			
DC										
FL										
GA										
ні							_			
ID			:				-			
IL		No	Limited Partnership Interests \$2,480,836.00	2	\$2,480,836.00	0	\$0	No		
IN										
IA										
KS				_						
KY										
LA										
ME										
MD										
MA										
MI										

# **APPENDIX**

1	T :	2	3		5				
	non-actinvestor (Pa	to sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount		
MN									
MS									
мо									
MT									
NE	-								
NV									
NH									
NJ									
NM									
NY									
NC									
ND		<u> </u>							
OH	<del> </del>	<u> </u>					•		
ОК									
OR	1								
PA									
RI									
sc	1								
SD									
TN	1								
TX		No	Limited Partnership Interests \$44,816,203.00	12	\$44,816,203.00	0	\$0	No	
UT									
VT		No	Limited Partnership Interests \$6,600,000.00	I	\$6,600,000.00	0	\$0	No	

# **APPENDIX**

1		2	3		4					
	non-actinvestor. (Par	to sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
VA										
WA										
WV						į				
WI								·-		
WY										
PR										

